Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN	
r 			(Column	n 1) (Co		mn 2)	TYPE		OR	SMALL	
TOTAL CLAIMS							RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEI	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*		X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II									•	OTHER	THAN
	(Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR	SMALL	
AMENDMENT *		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
NON	Total	* 22	Minus	** 0	0	= 2	X\$ 9=		OR	X\$18=	
AME	Independent	* / <i>O</i>	Minus	***	S TCLAIM	= 2	X42=		OR	X84=	
	FINOT PRESE	INTATION OF MIC	JETTEL DEF	LINDLIN	CEANV		+140=		OR	+280=	1
	\nearrow						TOTAL		OR	TOTAL ADDIT. FEE	
((Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. FEE			ADDII. FEE	,
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI: TIONAL FEE
NO.	Total	. /	Minus	** ~	22	=	X\$ 9=	/	OR	X\$18=	,
AME	Independent	* 10 NTATION OF MU	Minus	***	TCLAIM	= /	X42=		OR	X84=	
<u></u>	FINST PRESE	INTATION OF MIC	DETIPLE DEF	ENDEN	CLAIM		+140=	7	OR	+280=	
_							TOTAL ADDIT. FEE		OR	TÖTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	7.00120		=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENTE		CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=		0.0	X84=	
_	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	T CLAIM				OR		
				0	- #0" :	luma 2	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

		CLAIMS A	S FILED -		SMALL	OTHER THAN				
			(Column 1)		(Column 2)		TYPE		OR SMALL ENTIT	
FOR		NUMB	ER FILED	NUMBER	NUMBER EXTRA		FEE] [RATE	FEE
ВА	SIC FEE						380.00	OR		760.00
ТО	TAL CLAIMS		minus 2	*	*			OR	X\$18=	
INDEPENDENT CLAIMS minus 3 = *					X39=		OR	X78=	, -	
MU	ILTIPLE DEPEN	+130=		OR	+260=					
* If	the difference	TOTAL		OR	TOTAL	* " * •				
	C	LAIMS AS A	AMENDED	011411	- 12:37	•	OTHER			
_		(Column 1) CLAIMS	12	(Column 2) HIGHEST	(Column 3)	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus	# BO	=	X\$ 9=		OR	X\$18=	
	Independent	* 9	Minus	*** (= /	X39=		OR	X78=	
	FIRST PRESE	NIATION OF M	IULTIPLE DEP	ENDENT CLAIM		+130=		OR	+260=	
						TOTAL		OR	TOTAL	
		(a .)		(0.1	(0.1	ADDIT. FEE	<u>. </u>]	ADDIT. FEE	<u> </u>
		(Column 1)	*550 200	(Column 2) HIGHEST	(Column 3)		4001			455
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	,
	FIRST PRESE	NIATION OF M	IULTIPLE DEP	PENDENT CLAIM		+130=		OR	+260=	
						TOTAL ADDIT. FEE			TOTAL ADDIT FEE	
		(Column 1)		(Column 2)	(Column 3)	ADDIT. FEET			ADDIT: 1 EL	-
-	THE WALLEY W.	CLAIMS	LA SOUTH	HIGHEST	(Coldinii 3)		4 D D L		·	4551
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	=	V20			V70	
	FIRST PRESE	NTATION OF M	IULTIPLE DEP	ENDENT CLAIM		X39=		OR	X78=	
						+130=		OR	+260=	
**	If the "Highest Nu	mber Previously P	Paid For [*] IN THIS	mn 2, write "0" in co S SPACE is less tha	ın 20, enter "20."	TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										